Title of Intervention: A Provider-oriented Reminder Feedback and Educational Outreach Intervention

**Intervention Strategies:** Provider Education

**Purpose of the Intervention:** To increase complete diagnostic evaluation recommendation and performance rates in primary care practices

**Population:** Health care providers of African American patients with a prior positive colorectal cancer screening

Setting: Practices in southeastern Pennsylvania and southern New Jersey; health care facility-based

Partners: Public health research company, a laboratory

## **Intervention Description:**

• Provider Education: Health care providers received an educational outreach program. In the first session, a trained health care provider educator narrated a color slide presentation about colorectal cancer screening and complete diagnostic evaluation and led a discussion about the barriers to complete diagnostic evaluation. Complete diagnostic evaluations included a series of diagnostic tests for individuals with abnormal fecal occult blood tests. Each provider received a packet of materials for review. Then, an internal chart audit was conducted to determine whether complete diagnostic evaluations were conducted as needed. In the second session, the content of the first session was reviewed and a printed report of the chart audit results was distributed and discussed. Health care providers received a personalized letter about their internal chart audit results and a follow-up phone call to review the identified barriers to complete diagnostic evaluation and discuss how the barriers could be overcome.

**Theory:** Diagnostic Evaluation Model

### **Resources Required:**

• Staff/Volunteers: Trained health care provider educator

Training: Not mentioned

• Technology: Slide projector, printer

Space: Presentation space

Budget: Not mentioned

- Intervention: Internal chart audit forms, color slide presentation, printed reports, packet of educational material: (copy of key slides, a visit evaluation form, postage-paid return envelopes), personally tailored letters, paper
- Evaluation: Access to managed care office administrative claims and internal chart audit forms

#### **Evaluation:**

- Design: Group randomized controlled trial
- Methods and Measures: Data from chart audit forms and administrative claims were used to measure complete diagnostic evaluation recommendation and performance rates.

### **Outcomes:**

- Short Term Impact: There was a significant positive impact on complete diagnostic evaluation recommendation rates in both groups. Women were less likely than men to have had a complete diagnostic evaluation initiated by their health care providers.
- Long Term Impact: Not mentioned

Maintenance: Not mentioned

**Lessons Learned**: The use of reminders, performance feedback and educational outreach methods can be effective in changing a variety of provider practice patterns. The combination of these methods is likely to be more effective than single strategies.

# Citation(s):

Myers RE, Turner B, Weinberg D, et al. Impact of a physician-oriented intervention on follow-up in colorectal cancer screening. Prev Med. Apr 2004;38(4):375-381.

Turner B, Myers RE, Hyslop T, et al. Physician and patient factors associated with ordering a colon evaluation after a positive fecal occult blood test. J Gen Intern Med. May 2003;18(5):357-363.

Myers RE, Hyslop T, Gerrity M, et al. Physician intention to recommend complete diagnostic evaluation in colorectal cancer screening. Cancer Epidemiol Biomarkers Prev. Jul 1999;8(7):587-593.

Myers RE, Fishbein G, Hyslop T, et al. Measuring complete diagnostic evaluation in colorectal cancer screening. *Cancer Detect Prev.* 2001;25(2):174-182.

Myers RE, Turner B, Weinberg D, et al. Complete diagnostic evaluation in colorectal cancer screening: research design and baseline findings. *Prev Med.* Oct 2001;33(4):249-260.

Baig N, Myers RE, Turner BJ, et al. Physician-reported reasons for limited follow-up of patients with a positive fecal occult blood test screening result. *Am J Gastroenterol.* Sep 2003;98(9):2078-2081.